

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: HARVEY		NW 1/4 SE 1/4 NW 1/4	8	T 22 S	R 1 EW
Distance and direction from nearest town or city? 13 1/2 miles NW of HESSTON			Street address of well if located within city?		

2 WATER WELL OWNER: EDWARD DALKE		Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: RR #1		Application Number: 31757
City, State, ZIP Code: HESSTON, KS 67062		

3 DEPTH OF COMPLETED WELL: 68 ft. Bore Hole Diameter: 24 in. to 68 ft. and _____ in. to _____ ft.	
Well Water to be used as:	
1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below)
Well's static water level: 15 ft. below land surface measured on 6 month 2 day 80 year	
Pump Test Data: Well water was 38 ft. after 4 hours pumping 125 gpm	
Est. Yield 130 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm	

4 TYPE OF BLANK CASING USED:		Casing Joints: Glued <input checked="" type="checkbox"/> Clamped _____
1 Steel 2 PVC 3 RMP (SR) 4 ABS	5 Wrought iron 6 Asbestos-Cement 7 Fiberglass	8 Concrete tile 9 Other (specify below) 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)
Blank casing dia: 8 in. to 18 1/2 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		
Casing height above land surface: 18 1/2 in., weight _____ lbs./ft. Wall thickness or gauge No. _____		
TYPE OF SCREEN OR PERFORATION MATERIAL:		
1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel	5 Fiberglass 6 Concrete tile 7 Gauzed wrapped 8 Wire wrapped PVC 9 Torch cut	10 Asbestos-cement 11 Other (specify) 12 None used (open hole)
Screen or Perforation Openings Are:		
1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched	5 Gauzed wrapped 6 Wire wrapped PVC 7 Torch cut	8 Saw cut 9 Drilled holes 10 Other (specify)
Screen-Perforation Dia: 8 in. to 68 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		
Screen-Perforated Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		
Gravel Pack Intervals: From 10 ft. to 63 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		

5 GROUT MATERIAL:		1 Neat cement	2 Cement grout	3 Bentonite	4 Other
Grouted Intervals: From 0 ft. to 10 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:		10 Fuel storage 14 Abandoned water well 11 Fertilizer storage 15 Oil well/Gas well 12 Insecticide storage 16 Other (specify below) 13 Watertight sewer lines 17 creek			
1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy	7 Sewage lagoon 8 Feed yard 9 Livestock pens				
Direction from well: North How many feet: 750/900 ? Water Well Disinfected? Yes No					
Was a chemical/bacteriological sample submitted to Department? Yes No If yes, date sample was submitted _____ month _____ day _____ year					
If Yes: Pump Manufacturer's name: Pumpco Model No. PS 130 HP 7 1/2 Volts 230					
Depth of Pump Intake: 60 ft. Pumps Capacity rated at _____ gal./min.					
Type of pump:		1 Submersible	2 Turbine	3 Jet	4 Centrifugal
		5 Reciprocating	6 Other		

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 12 month 16 day 80 year	
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 175	
This Water Well Record was completed on 12 month 18 day 80 year under the business name of PAUL'S INC by (signature) Paul Bunthart	

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	3	Silty LOAM			
	3	7	br fine Sandy clay			
	7	14	grey to Red clay w/ ALKALI			
	14	28	med to coarse sand			
	28	31	Light tan clay			
	31	37	med SAND			
	37	38	clay layer			
	38	52	SAND - white - med to coarse			
	52		thin CAL. seam			
	52	65	SAND - coarse - brown			
	65	68	green-grey shale			

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

INSTRUCTIONS: Use typewriter or ball point pen, please press firmly and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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EW

SEC

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NW, SE 1/4 NW 1/4